

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

FRED THOMPSON POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

10332 MAIN STREET

☐Check if different
than previously
reported. (ACC)

FAIRFAX

VA

22030

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00438507

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

RICHARD ROBERTS

Signature of Treasurer

Electronically Filed by RICHARD ROBERTS

Date

07

07

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 56

Write or Type Committee Name

FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		202472.36
(b) Cash on Hand at Beginning of Reporting Period	202472.36	
(c) Total Receipts (from Line 19)	52688.48	52688.48
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	255160.84	255160.84
7. Total Disbursements (from Line 31)	210272.26	210272.26
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44888.58	44888.58
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	23733.58	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

FRED THOMPSON POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
0	6	3	0	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3108.89	3108.89
(ii) Unitemized	14011.00	14011.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17119.89	17119.89
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	22119.89	22119.89
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2009.80	2009.80
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	28558.79	28558.79
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	52688.48	52688.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	52688.48	52688.48

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	197217.26	197217.26	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	197217.26	197217.26	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	8000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	55.00	55.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	55.00	55.00	
29. Other Disbursements.....	5000.00	5000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	210272.26	210272.26	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	210272.26	210272.26	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	22119.89	22119.89
34. Total Contribution Refunds (from Line 28(d))	55.00	55.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22064.89	22064.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	197217.26	197217.26
37. Offsets to Operating Expenditures (from Line 15, page 3)	2009.80	2009.80
38. Net Operating Expenditures (subtract Line 37 from Line 36)	195207.46	195207.46

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 6 / 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NIKOLAS RULENature of Debt (Purpose):
UNCASHED CHECK VOIDED.
TO BE RE-ISSUED.

Mailing Address 2530 73RD STREET

City State ZIP Code
URBANDALE IA 50322

Outstanding Balance Beginning This Period

34.37

Transaction ID: SD.010

Amount Incurred This Period

0.00

Payment This Period

34.37

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AUSTIN WALNENature of Debt (Purpose):
UNCASHED CHECK VOIDED.
CHECK WILL BE RE

Mailing Address 1760 OLD MEADOW ROAD

City State ZIP Code
MCLEAN VA 22102

Outstanding Balance Beginning This Period

46.00

Transaction ID: SD.011

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

46.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AJL INTERNATIONALNature of Debt (Purpose):
TRANSPORTATION SERVICES/V-
ENDOR CONTACTED

Mailing Address 1227 17TH AVENUE SOUTH

City State ZIP Code
NASHVILLE TN 37212

Outstanding Balance Beginning This Period

608.11

Transaction ID: SD.001

Amount Incurred This Period

0.00

Payment This Period

-608.11

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

46.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 7 / 56

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 GLOBAL CROSSING CONFERENCING

 Nature of Debt (Purpose):
 TELEPHONE SERVICE; BALAN-
 CE IS IN DISPUT

Mailing Address P.O. BOX 790407

City	State	ZIP Code
ST. LOUIS	MO	63179

Outstanding Balance Beginning This Period

23687.58

Transaction ID: SD.004

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23687.58

1) **SUBTOTALS** This Period This Page (optional)..... ▶

23687.58

2) **TOTALS** This Period (last page this line number only)..... ▶

23733.58

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

23733.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SHARON CORNWELL

Mailing Address 3 BAY ROAD

City

WELLESLEY

State

MA

Zip Code

02482-4321

FEC ID number of contributing
federal political committee.

C

Name of Employer
DART MANAGEMENT INC.

Occupation

FINANCIAL ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: SA11.251313

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD A. DEAN

Mailing Address 13631 IBBETSON

City

BELLFLOWER

State

CA

Zip Code

90706-2517

FEC ID number of contributing
federal political committee.

C

Name of Employer
T.H.X. L.T.D.

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 7 / 2 0 0 9

Transaction ID: SA11.251276

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MIKE DEW

Mailing Address 801 N. PITT STREET, #420

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: SA.001

Amount of Each Receipt this Period

242.00

CONVERSION TO IN-KIND CON-
TRIBUTION; UNABLE TO LOCA-
TE PAYEE

SUBTOTAL of Receipts This Page (optional)

992.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. HAROLD DICKERSON

Mailing Address 2916 SHADOW DRIVE WEST

City

ARLINGTON

State

TX

Zip Code

76006-2722

FEC ID number of contributing
federal political committee.

C

Name of Employer

IRVING RADIOLOGICAL ASSOC-
IATES

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: SA11.250928

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

KENNETH HILL

Mailing Address 750 SOUTH DOUGLAS ST

City

EL SEGUNDO

State

CA

Zip Code

90245-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer

METALORE INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: SA11.250948

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NANCY HUBBART

Mailing Address 3095 KEY HARBOUR DRIVE

City

LAKE ST. LOUIS

State

MO

Zip Code

63367-2097

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN POOLPLAYERS ASSO-
C. INC

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 2 / 2 0 0 9

Transaction ID: SA11.251117

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARRY KELLEY

Mailing Address 23 W. WEBSTER STREET

City

MANCHESTER

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: SA.002

Amount of Each Receipt this Period

116.89

CONVERSION TO IN-KIND CON-
TRIBUTION OF UNCASHED CHE-
CK; UNABLE TO LOCATE PAYEE

B.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY KNIGHT

Mailing Address 1059 BLACK RUSH CIRCLE

City

MOUNT PLEASANT

State

SC

Zip Code

29466-8082

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOATSAFE, INC

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 0 / 2 0 0 9

Transaction ID: SA11.250855

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ARTHUR MOELLER

Mailing Address 350 CLARK HOLLOW RD

City

NEW FLORENCE

State

PA

Zip Code

15944-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

LUTHIER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: SA11.251145

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

616.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STUART NICKERSON

Mailing Address 1032 FEARRINGTON POST

City

PITTSBORO

State

NC

Zip Code

27312-5502

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: SA11.251297

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HANK PIERSON

Mailing Address 132 AZALEA WAY

City

EUREKA

State

CA

Zip Code

95503-9550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: SA11.251012

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOHN SPERRY REYNOLDS

Mailing Address 670 ROMERO CANYON

City

SANTA BARBARA

State

CA

Zip Code

93108-1527

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 7 / 2 0 0 9

Transaction ID: SA11.251269

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

3108.89

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 56

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CERNER CORPORATION PAC

Mailing Address 2800 ROCKCREEK PARKWAY

City

KANSAS CITY

State

MO

Zip Code

64117-2521

FEC ID number of contributing
federal political committee.**C**

C00410589

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	9

Transaction ID: SA11.251295

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 56

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PITNEY BOWES

Mailing Address P.O. BOX 856390

City

LOUISVILLE

State

KY

Zip Code

40285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: SA.003

Amount of Each Receipt this Period

9.80

B.

Full Name (Last, First, Middle Initial)

U.S. POSTAL SERVICE

Mailing Address 525 ROYAL PARKWAY

City

NASHVILLE

State

TN

Zip Code

37229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: SA.004

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

2009.80

TOTAL This Period (last page this line number only)

2009.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 56

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DIAMOND LIST MARKETING COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 0 9

Transaction ID: SA.005

Amount of Each Receipt this Period

3985.70

USUAL AND CUSTOMARY MARKET COSTS

B.

Full Name (Last, First, Middle Initial)
DIAMOND LIST MARKETING COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: SA.006

Amount of Each Receipt this Period

3334.21

USUAL AND CUSTOMARY MARKET COSTS

C.

Full Name (Last, First, Middle Initial)
DIAMOND LIST MARKETING COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: SA.007

Amount of Each Receipt this Period

11810.37

USUAL AND CUSTOMARY MARKET COSTS

SUBTOTAL of Receipts This Page (optional)

19130.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 56

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DIAMOND LIST MARKETING COMPANY

Mailing Address 6715 LITTLE RIVER TURNPIKE

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 9

Transaction ID: SA.008

Amount of Each Receipt this Period

5558.80

USUAL AND CUSTOMARY MARKET
COSTS

B.

Full Name (Last, First, Middle Initial)
DIAMOND LIST MARKETING

Mailing Address 6715 LITTLE RIVER TURNPIKE

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: SA.009

Amount of Each Receipt this Period

3869.71

USUAL AND CUSTOMARY MARKET
COSTS

SUBTOTAL of Receipts This Page (optional)

9428.51

TOTAL This Period (last page this line number only)

28558.79

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHARLES ADAMS

Mailing Address 1623 45TH STREET

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
VOID UNCASHED CHECK FOR TRAVEL EXPENSES.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-360.00

CHECK RE-ISSUED 1/12/09

B.

Full Name (Last, First, Middle Initial)

CHARLES ADAMS

Mailing Address 1623 45TH STREET

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
RE-ISSUE STALE DATED CHECK/TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

360.00

C.

Full Name (Last, First, Middle Initial)

MIKE DEW

Mailing Address 801 N PITT STREET, #420

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.003

Date of Disbursement

/ /

Amount of Each Disbursement this Period

242.00

CONVERSION TO IN-KIND CONTRIBUTION OF UNCASHED EXPENSE CHECK

SUBTOTAL of Disbursements This Page (optional)

242.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SUNNY'S EXECUTIVE SEDAN SERVICE

Mailing Address 5252 CHEROKEE AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
TRANSPORTATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.055

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

149.55

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MIKE DEW

Mailing Address 801 N PITT STREET, #420

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.004

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

-242.00

ORIGINAL CHECK DATED 10/2-6/07 VOIDED. UNABLE TO LOCATE; CONVERTED TO IN-KIND CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BARRY KELLEY

Mailing Address 23 W. WEBSTER STREET

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.005

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

-116.89

CHECK DATED 1/14/08 VOIDED; UNABLE TO LOCATED PAYEE; CONVERTED TO IN-KIND CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

-358.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARRY KELLEY

Mailing Address 23 W. WEBSTER STREET

City MANCHESTER State NH Zip Code 03104

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.006

Date of Disbursement

/ /

Amount of Each Disbursement this Period

116.89

CONVERSION OF IN-KIND CONTRIBUTION OF UNCASHED EXPENSE CHECK

B.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City OLD HICKORY State TN Zip Code 37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1243.48

C.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City OLD HICKORY State TN Zip Code 37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1243.48

SUBTOTAL of Disbursements This Page (optional)

2603.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City
OLD HICKORY

State
TN

Zip Code
37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.009

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

1243.48

B.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City
OLD HICKORY

State
TN

Zip Code
37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.010

Date of Disbursement

02 / 26 / 2009

Amount of Each Disbursement this Period

1243.48

C.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City
OLD HICKORY

State
TN

Zip Code
37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.011

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

1276.81

SUBTOTAL of Disbursements This Page (optional)

3763.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.012

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.069

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 56

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.083

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1276.81

B.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1276.81

C.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City State Zip Code
 OLD HICKORY TN 37138

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.100

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1276.81

SUBTOTAL of Disbursements This Page (optional)

3830.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BOBBIE MURPHY

Mailing Address 4815 WAYSIDE DRIVE

City
OLD HICKORY

State
TN

Zip Code
37138

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.101

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1276.81

B.

Full Name (Last, First, Middle Initial)

NIKOLAS RULE

Mailing Address 2530 73RD STREET

City
URBANDALE

State
IA

Zip Code
50322

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.37

RE-ISSUE OF LOST CHECK

C.

Full Name (Last, First, Middle Initial)

MICHAEL TURK

Mailing Address 6138 CHESTERBROOK ROAD

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
WEB SITE COSTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.085

Date of Disbursement

/ /

Amount of Each Disbursement this Period

113.86

SUBTOTAL of Disbursements This Page (optional)

1425.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RAY WOLTRING

Mailing Address 9860 OAKDALE WOODS COURT

City
VIENNA

State
VA

Zip Code
22181

Purpose of Disbursement
LIST MAINTENANCE/MAILING SELECTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.014

Date of Disbursement

02 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City
PHOENIX

State
AZ

Zip Code
85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.015

Date of Disbursement

01 / 05 / 2009

Amount of Each Disbursement this Period

20.92

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City
PHOENIX

State
AZ

Zip Code
85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.016

Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

0.88

SUBTOTAL of Disbursements This Page (optional)

1021.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address P.O. BOX 53852</p> <p>City PHOENIX State AZ Zip Code 85072</p> <p>Purpose of Disbursement TRANSPORTATION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.017</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="149.55"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address P.O. BOX 53852</p> <p>City PHOENIX State AZ Zip Code 85072</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.018</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.38"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address P.O. BOX 53852</p> <p>City PHOENIX State AZ Zip Code 85072</p> <p>Purpose of Disbursement CREDIT CARD PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.070</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.33"/></p>

SUBTOTAL of Disbursements This Page (optional)

207.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City
PHOENIX

State
AZ

Zip Code
85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.102

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.61

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City
PHOENIX

State
AZ

Zip Code
85072

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.103

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1.77

C.

Full Name (Last, First, Middle Initial)

ASSOCIATED PRESS

Mailing Address 450 WEST 33RD STREET

City
NEW YORK

State
NY

Zip Code
10001

Purpose of Disbursement
MEDIA SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-90.00

CHECK UNCASHED; UNABLE TO
LOCATE VENDOR OFFICE

SUBTOTAL of Disbursements This Page (optional)

-81.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A. ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.020

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

4000.00

STRATEGIC PLANNING/FUNDRAISING/ADMINISTRATION

B. ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.021

Date of Disbursement

02 / 09 / 2009

Amount of Each Disbursement this Period

4000.00

STRATEGIC PLANNING/FUNDRAISING/ADMINISTRATION

C. ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.022

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

4000.00

STRATEGIC PLANNING/FUNDRAISING/PUBLIC RELATIONS

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City State Zip Code
FAIRFAX VA 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.071

Date of Disbursement

/ /

Amount of Each Disbursement this Period

STRATEGIC PLANNING/FUND-R-
AISING/PUBLIC RELATIONS

B.

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City State Zip Code
FAIRFAX VA 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.104

Date of Disbursement

/ /

Amount of Each Disbursement this Period

STRATEGIC PLANNING/FUND-R-
AISING/PUBLIC RELATIONS

C.

Full Name (Last, First, Middle Initial)

ASSOCIATED PUBLIC AFFAIRS PROFESSIONALS

Mailing Address 10424 WOODBURY WOODS COURT

City State Zip Code
FAIRFAX VA 22032

Purpose of Disbursement
PROF. SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

STRATEGIC PLANNING/FUND-R-
AISING/PUBLIC RELATIONS

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address P.O. BOX 25118

City
TAMPA

State
FL

Zip Code
33622

Purpose of Disbursement
ESTIMATED TAX PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.023

Date of Disbursement

03 / 16 / 2009

Amount of Each Disbursement this Period

93000.00

B.

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address P.O. BOX 25118

City
TAMPA

State
FL

Zip Code
33622

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.024

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

7.05

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.025

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

4378.14

SUBTOTAL of Disbursements This Page (optional)

97385.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.026

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2009

Amount of Each Disbursement this Period

143.75

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
LIST FILE MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.027

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2009

Amount of Each Disbursement this Period

733.26

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
FILE MAINTENANCE/COMPLIANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.072

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2009

Amount of Each Disbursement this Period

842.82

SUBTOTAL of Disbursements This Page (optional)

1719.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
FILE MAINTENANCE/COMPLIANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.086

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3700.00

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
FILE MAINTENANCE/COMPLIANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.105

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2100.00

C.

Full Name (Last, First, Middle Initial)

CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City
FAIRFAX

State
VA

Zip Code
22032

Purpose of Disbursement
PROF. SERVICE/.EXP. REIM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.028

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1276.00

BOOKKEEPING \$1150/P.O. BOX
RENT \$126.00

SUBTOTAL of Disbursements This Page (optional)

7076.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
PROF. SERVICES - ADMINISTRATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.029

Date of Disbursement

/ /

Amount of Each Disbursement this Period

900.00

B. Full Name (Last, First, Middle Initial)
CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
CONSULTING - BOOKKEEPING & ADMINISTRATIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.030

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City FAIRFAX State VA Zip Code 22032

Purpose of Disbursement
CONSULTING - BOOKKEEPING & ADMINISTRATIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.073

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City State Zip Code
FAIRFAX VA 22032

Purpose of Disbursement
ADMINISTRATIVE SERVICES/PO BOX RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

376.00

B.

Full Name (Last, First, Middle Initial)
CW ACCOUNTING SERVICES

Mailing Address 10424 WOODBURY WOODS COURT

City State Zip Code
FAIRFAX VA 22032

Purpose of Disbursement
PROF. SERVICES - BOOKKEEPING/EXP REIM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.106

Date of Disbursement

/ /

Amount of Each Disbursement this Period

257.25

POSTAGE 7.25

C.

Full Name (Last, First, Middle Initial)
ELAVON MERCHANT SERVICES

Mailing Address 7300 CHAMPION HIGHWAY

City State Zip Code
KNOXVILLE TN 37920

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.107

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.45

SUBTOTAL of Disbursements This Page (optional)

698.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 660481

City
TALLAHASSEE

State
FL

Zip Code
32309

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.031

Date of Disbursement

/ /

Amount of Each Disbursement this Period

49.88

B.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 660481

City
TALLAHASSEE

State
FL

Zip Code
32309

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

45.48

C.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 660481

City
TALLAHASSEE

State
FL

Zip Code
32309

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.033

Date of Disbursement

/ /

Amount of Each Disbursement this Period

109.74

SUBTOTAL of Disbursements This Page (optional)

205.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 660481

City
TALLAHASSEE

State
FL

Zip Code
32309

Purpose of Disbursement
DELIVERY CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.088

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

24.50

B.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 660481

City
TALLAHASSEE

State
FL

Zip Code
32309

Purpose of Disbursement
DELIVERY CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.108

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

24.50

C.

Full Name (Last, First, Middle Initial)

MT SECURITY AND INVESTIGATIONS

Mailing Address 7366 BROADWAY STREET
SUITE A

City
LEMON GROVE

State
CA

Zip Code
91945

Purpose of Disbursement
EVENT PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.034

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

-65.00

ORIGINAL CHECK DATED 10/2-4/07 IS BEING VOIDED. PROVIDER CONTACTED, NO OUTSTANDING BALANCE EXISTED.

SUBTOTAL of Disbursements This Page (optional)

-16.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SERVICES INC

Mailing Address 7300 CHAMPION HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.035

Date of Disbursement

01 / 05 / 2009

Amount of Each Disbursement this Period

206.03

B.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SERVICES INC

Mailing Address 7300 CHAMPION HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.036

Date of Disbursement

02 / 05 / 2009

Amount of Each Disbursement this Period

45.45

C.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SERVICES INC

Mailing Address 7300 CHAMPION HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.037

Date of Disbursement

03 / 03 / 2009

Amount of Each Disbursement this Period

45.45

SUBTOTAL of Disbursements This Page (optional)

296.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SERVICES INC

Mailing Address 7300 CHAMPION HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.074

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

285.48

B.

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SERVICES INC

Mailing Address 7300 CHAMPION HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.109

Date of Disbursement

05 / 04 / 2009

Amount of Each Disbursement this Period

66.05

C.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.038

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

112.64

SUBTOTAL of Disbursements This Page (optional)

464.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL PROCESSING FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.039</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 39.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.040</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 423.77</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.041</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 423.77</p>

SUBTOTAL of Disbursements This Page (optional)

886.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.042

Date of Disbursement

02 / 10 / 2009

Amount of Each Disbursement this Period

179.84

B.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.043

Date of Disbursement

02 / 13 / 2009

Amount of Each Disbursement this Period

423.77

C.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.044

Date of Disbursement

02 / 27 / 2009

Amount of Each Disbursement this Period

423.77

SUBTOTAL of Disbursements This Page (optional)

1027.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 56

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL PROCESSING FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.045</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>112.64</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.046</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 3 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>372.94</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 22 CENTURY BLVD SUITE 150</p> <p>City NASHVILLE State TN Zip Code 37229</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.047</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>337.94</div> </p>

SUBTOTAL of Disbursements This Page (optional)

823.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL PROCESSING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.075

Date of Disbursement

04 / 10 / 2009

Amount of Each Disbursement this Period

56.32

B.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.076

Date of Disbursement

04 / 15 / 2009

Amount of Each Disbursement this Period

337.94

C.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.077

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

337.94

SUBTOTAL of Disbursements This Page (optional)

732.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 56

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.089

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

174.91

B.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.090

Date of Disbursement

05 / 15 / 2009

Amount of Each Disbursement this Period

337.94

C.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.091

Date of Disbursement

05 / 28 / 2009

Amount of Each Disbursement this Period

114.72

SUBTOTAL of Disbursements This Page (optional)

627.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.092

Date of Disbursement

05 / 31 / 2009

Amount of Each Disbursement this Period

337.94

B.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.110

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

337.94

C.

Full Name (Last, First, Middle Initial)

PAYCHEX

Mailing Address 22 CENTURY BLVD
SUITE 150

City NASHVILLE State TN Zip Code 37229

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.111

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

337.94

SUBTOTAL of Disbursements This Page (optional)

1013.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAYPAL, INC.

Mailing Address 1840 EMBARCADERO ROAD

City PALO ALTO State CA Zip Code 94303

Purpose of Disbursement
DONATION PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.078

Date of Disbursement

04 / 24 / 2009

Amount of Each Disbursement this Period

17.87

B.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement
PROF. SERVICES - MEDIA/PUBLIC RELATIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.048

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement
PROF. SERVICES - MEDIA/PUBLIC RELATIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.049

Date of Disbursement

02 / 09 / 2009

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10017.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City
NASHVILLE

State
TN

Zip Code
37221

Purpose of Disbursement
REIM AIRLINE TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.050

Date of Disbursement

/ /

Amount of Each Disbursement this Period

396.20

DELTA AIRLINES

B.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City
NASHVILLE

State
TN

Zip Code
37221

Purpose of Disbursement
CONSULTING - PUBLIC RELATIONS AND MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City
NASHVILLE

State
TN

Zip Code
37221

Purpose of Disbursement
CONSULTING - PUBLIC RELATIONS/MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7896.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement
CONSULTING PUBLIC RELATIONS/MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.093

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

RJD GROUP

Mailing Address P.O. BOX 210753

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement
CONSULTING - PUBLIC RELATIONS/MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.112

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB-BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.052

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB-BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.053

Date of Disbursement

02 / 09 / 2009

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB-BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.054

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB-BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.080

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.094

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

SENDLABS

Mailing Address 121 RIVER FRONT DRIVE, #2

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement
WEB-BASED DONOR CONTACT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.113

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

SPELNA, INC.

Mailing Address 225 INDUSTRIAL COURT

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.095

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

46.55

SUBTOTAL of Disbursements This Page (optional)

1546.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SPELNA, INC.

Mailing Address 225 INDUSTRIAL COURT

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.114

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

13.68

B.

Full Name (Last, First, Middle Initial)

TRIO STRATEGIES

Mailing Address 9146 WOOD POINTE WAY

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
THANK YOU LETTERS/PRINTING & POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.056

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

143.84

C.

Full Name (Last, First, Middle Initial)

TRIO STRATEGIES

Mailing Address 9146 WOOD POINTE WAY

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
PREPARE AND MAIL THANK YOUS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.057

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional)

197.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TRIO STRATEGIES

Mailing Address 9146 WOOD POINTE WAY

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
THANK YOU LETTERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

B.

Full Name (Last, First, Middle Initial)

TRIO STRATEGIES

Mailing Address 9146 WOOD POINTE WAY

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
THANK YOU LETTERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.115

Date of Disbursement

/ /

Amount of Each Disbursement this Period

243.88

C.

Full Name (Last, First, Middle Initial)

UPS STORE

Mailing Address 10332 MAIN STREET

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
POST OFFICE RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

278.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

UPS STORE

Mailing Address 10332 MAIN STREET

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
POST OFFICE BOX RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

126.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US MONITOR

Mailing Address 86 MAPLE AVENUE

City State Zip Code
NEW CITY NY 10956

Purpose of Disbursement
MAIL MONITORING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.058

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.60

C.

Full Name (Last, First, Middle Initial)

US MONITOR

Mailing Address 86 MAPLE AVENUE

City State Zip Code
NEW CITY NY 10956

Purpose of Disbursement
MAIL MONITORING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.059

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.75

SUBTOTAL of Disbursements This Page (optional)

56.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

US MONITOR

Mailing Address 86 MAPLE AVENUE

City
NEW CITY

State
NY

Zip Code
10956

Purpose of Disbursement
MAIL MONITORING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.082

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

28.50

B.

Full Name (Last, First, Middle Initial)

US MONITOR

Mailing Address 86 MAPLE AVENUE

City
NEW CITY

State
NY

Zip Code
10956

Purpose of Disbursement
MAIL MONITORING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.096

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

43.75

C.

Full Name (Last, First, Middle Initial)

WADE STRATEGIC COMMUNICATIONS

Mailing Address 6846 MCLEAN PROVINCE CIRCLE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
WEB SITE DESIGN/MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.097

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)

7572.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WADE STRATEGIC COMMUNICATIONS

Mailing Address 6846 MCLEAN PROVINCE CIRCLE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
WEB SITE DESIGN/MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.116

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

6000.00

B.

Full Name (Last, First, Middle Initial)

WEBSTER, CHAMBERLAIN AND BEAN

Mailing Address 1747 PENNSYLVANIA AVENUE, NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.060

Date of Disbursement

01 / 19 / 2009

Amount of Each Disbursement this Period

472.00

C.

Full Name (Last, First, Middle Initial)

WEBSTER, CHAMBERLAIN AND BEAN

Mailing Address 1747 PENNSYLVANIA AVENUE, NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.061

Date of Disbursement

02 / 25 / 2009

Amount of Each Disbursement this Period

31.00

SUBTOTAL of Disbursements This Page (optional)

6503.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WEBSTER, CHAMBERLAIN AND BEAN

Mailing Address 1747 PENNSYLVANIA AVENUE, NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.062

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1255.05

B.

Full Name (Last, First, Middle Initial)

WEBSTER, CHAMBERLAIN AND BEAN

Mailing Address 1747 PENNSYLVANIA AVENUE, NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.098

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2860.63

C.

Full Name (Last, First, Middle Initial)

YUMA SOLUTIONS, INC.

Mailing Address P.O. BOX 152075

City
TALLAHASSEE

State
FL

Zip Code
33684

Purpose of Disbursement
WEB HOSTING/SERVER MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.117

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4207.94

SUBTOTAL of Disbursements This Page (optional)

8323.62

TOTAL This Period (last page this line number only)

197217.26

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOSEPH CAO FOR CONGRESS

Mailing Address P.O. BOX 56156

City
NEW ORLEANS

State
LA

Zip Code
70156

Purpose of Disbursement
POLITICAL DONATION

Candidate Name
JOSEPH CAO

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 02

Transaction ID: SB.063

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

SIMMONS FOR SENATE

Mailing Address P.O. BOX 268

City
STONINGTON

State
CT

Zip Code
06378

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
ROBERT SIMMONS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District:

Transaction ID: SB.099

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

SUSAN B. ANTHONY LIST INC. CANDIDATE FUND

Mailing Address 1800 NORTH KENT STREET, #1070

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.064

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

8000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GERALD HAUSE

Mailing Address 3166 COL. JOHN KELLY ROAD

City
LEWISBURG

State
PA

Zip Code
17837

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB.065

Date of Disbursement

/ /

Amount of Each Disbursement this Period

55.00

STALE DATED CHECK CASHED
BY BANK

SUBTOTAL of Disbursements This Page (optional)

55.00

TOTAL This Period (last page this line number only)

55.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

FRED THOMPSON POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARRETT FOR GOVERNOR

Mailing Address P.O. BOX 287

City
COLUMBIA

State
SC

Zip Code
29202

Purpose of Disbursement
POLITICAL DONOR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.118

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

3500.00

SOUTH CAROLINA GOVERNOR

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF BARBARA COMSTOCK

Mailing Address 1114 DUKE STREET

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.066

Date of Disbursement

02 / 11 / 2009

Amount of Each Disbursement this Period

500.00

VA HOUSE OF DELEGATES 34TH DISTRICT

C.

Full Name (Last, First, Middle Initial)

MCDONNELL FOR GOVERNOR

Mailing Address 2819 NORTH PARHAM ROAD, #210

City
RICHMOND

State
VA

Zip Code
23294

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB.067

Date of Disbursement

02 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

GOVERNOR VIRGINIA

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00